

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1000.00)

Complete If Known

Application Number

10/700,991

RECEIVED

Filing Date

11/3/2003

CENTRAL FAX CENTER

First Named Inventor

Vahid Tarokh

Examiner Name

Dung Le Lam

NOV 4 2005

Art Unit

2687

Attorney Docket No.

MN1 0004US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$)

Fee (\$)</div

PTO/SB/21 (08-03)

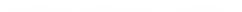
Approved for use through 07/31/2008. OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/700,991			
		Filing Date 11/3/2003			
		First Named Inventor Vahid Tarokh			
		Group Art Unit 2687			
		Examiner Name Dung Le Lem			
Total Number of Pages in This Submission	28	Attorney Docket Number			
ENCLOSURES (check all that apply)					
<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="vertical-align: top; width: 33%;"> <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): </td> </tr> </table>			<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application					
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53					
<input type="checkbox"/> Remarks					

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	David A. Morasch/Reg. No. 42905
Signature	
Date	November 4, 2005

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	11/4/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NOV 04 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. 10/700,991
Filing Date 11/03/2003
Inventorship Tarokh et al.
Applicant Vivato Corporation
Group Art Unit 2687
Examiner Lam, Dung Le
Attorney's Docket No. MN1-004US
Title: Complementary Beamforming Methods and Apparatuses

RESPONSE TO OFFICE ACTION DATED SEPTEMBER 8, 2005

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

From: David A. Morasch Tel. 509-324-9256 ext. 210
Fax 509-323-8979
Customer # 29150

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